PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

Application or Docket Number 10/553110

Effective December 8, 2004								10/505110				
		· ·	AS FILED (Colum	•	(Column 2)			SMALL ENTITY TYPE		OR	OTHER SMALL	THAN ENTITY
U.S	S. NATIONAL	STAGE FEES						RATE	FEE	1	RATE	FEE
BA	SIC FEE	· · · · · · · · · · · · · · · · · · ·		SMALL ENT. = \$ 150		LARGE ENT. = \$ 300		BASIC FEE		OR	BASIC FEE	302
EX.	MENATION F	EE	(4) = , \$.50	Salisties PCT Article 83(1)- (4) = ,8.50/8 100		ther situations = 3 100 / \$ 200	•	EXAM. FEE		1 .	EXAM. FEE	1
9E/	ARCH FEE		ALL other or	U.S. is ISA = \$50 / \$ 100 ALL other countries = \$ 200 / \$ 400		ther situations = - \$ 250 / \$ 600	ì	SEARCH FEE	·		SEARCH FEE	2EV 4W
FE	FOR EXTRA	SPEC. PGS.	minus 100 =			/50= ·.		X.\$ 125 =		1.	X \$ 250 =	100
TO	AL CHARGEA	BLE CLAIMS	6 m	iņus 20 =	• —	·		X \$ 25 =		OR	X \$ 50'=	
סאו	EPENDENT C	LAIMS	7	ninus 3 =	• -			X \$ 100 =		OR	X \$ 200 =	
	,	IDENT CLAIM PR						+ \$ 180 =		OR	+\$ 380 =	
If the difference in column 1 is less than zero, enter "0" in column 2						•	TOTAL		OR	TOTAL	900	
		CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST						SMALL E		OR	OTHER SMALL E	
AMENOMENTA		REMAINING AFTER AMENDMENT		PREVIO PAID	USLY	PRESENT EXTRA	,	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	6	Minus	6		8		X \$ 25 =		OR	X \$ 50 =	
	Independent	1 2	Minus.	2		=	L	X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 380 =	
			•					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colum	in 2)	(Cokenn 3)						•
X		CLAIMS REMAINING AFTER AMENOMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· ·	Minus			a '		X \$ 25 =		OR	X \$ 60 =	
	Independent	•	Minus	***		5	Γ	X \$ 100 =		OR	X \$ 200 =	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					Γ	+\$ 180 =	7	OR	+ \$ 360 =	-	
•								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Righest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20", *** If the "Righest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3". The "Righest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".												

FORM PTO-875 (Raw, MI/2004)